

STATE OF FLORIDA  
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES  
DIVISION OF MOTOR VEHICLES  
Neil Kirkman Building - Tallahassee, FL 32399-0620

**REQUEST FOR DECALS**  
**BIRTH MONTH, YEAR AND PARKING PERMIT**

COUNTY NAME: \_\_\_\_\_ COUNTY # \_\_\_\_\_ AGENCY # \_\_\_\_\_

PHONE # \_\_\_\_\_

TAX COLLECTOR OR AGENT NAME: \_\_\_\_\_

SHIP TO: \_\_\_\_\_

<b>BIRTH MONTH DECALS</b>		
<input type="checkbox"/> VEHICLE LICENSE PLATE DECALS <input type="checkbox"/> PARKING PERMIT DECALS <input type="checkbox"/> VESSEL DECALS		
MONTH	QUANTITY	DMV USE ONLY
JAN		
FEB		
MAR		
APR		
MAY		
JUN		
JUL		
AUG		
SEP		
OCT		
NOV		
DEC		

<b>YEAR DECALS</b>		
<input type="checkbox"/> PARKING PERMIT DECALS <input type="checkbox"/> VESSEL DECALS		
YEAR	QUANTITY	DMV USE ONLY

<b>PRIMARY VESSEL DECALS</b>		
(Only to be ordered for wallet size registration and decal participants.)		
COLOR	QUANTITY	DMV USE ONLY

<b>PARKING PERMIT LABELS</b>	
QUANTITY	DMV USE ONLY

SIGNATURE: \_\_\_\_\_

Tax Collector, License Plate Manager or Supply Clerk

Date of Order

HSMV 83417 (Rev. 3/00) S

☐ PHONE

☐ FAX

☐ MAIL